

Appendix A
APPLICATION
For Approval of a Continuing Education Activity for Court Interpreter
Continuing Education Credit

1. Provider Name: _____

Address _____

Phone Number: _____

2. Status of Provider ☐ Individual ☐ Corporation ☐ Partnership
 ☐ Professional ☐ Government ☐ Educational
 Organization Agency Institution

3. Activity or course title: _____

4. Name and profession of each instructor (*attach résumé for each*):

5. Topics to be covered in activity (*attach outline or syllabus, indicating the amount of time to be spent on each topic*).*

6. Date(s), time(s), location(s), and registration fees of activity _____

**If this is not an interpreting course, please include a statement addressing how the topics relate to the profession of interpreting.*

7. Total number of contact hours _____
8. Anticipated number of students _____
9. Course materials to be used (*textbooks, videos, audiovisual equipment, etc.*) _____
10. I, _____, representing the above-named continuing education provider named herein, do hereby certify that the provider has been granted permission by the author or authors of all materials presented in this continuing education activity to copy such materials, and that no violation of copyright will occur in the dissemination of materials for this continuing education activity.

Signature

Date

- Attachments: ☐ résumé or curriculum vita of each instructor
- ☐ syllabus
- ☐ copy of promotional materials used to advertise the activity

FOR OAC USE ONLY

Application approved by Continuing Education Approval Subcommittee
for _____ continuing education credits on _____

Signature of Subcommittee Chair _____

Number assigned _____

**If this is not an interpreting course, please include a statement addressing how the topics relate to the profession of interpreting.*